## BEST AVAILABLE COPY -

<u>.</u> -	PATENT A	APPLICATIO Effecti	N FEE DE	RD	^	Application or Docket Number							
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			21				Γ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			2 4minus 20=		• 4			X\$ 9=	36	OR	X\$18=	36	
INDEPENDENT CLAIMS			2. minus 3 =		*			X42=		OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT						+140=		+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	406	OR OR	TOTAL		
CLAIMS AS AMENDED - PART II 8/15/0									ENTITY		OTHER SMALL E		
		(Column 1) CLAIMS		(Colui		(Column 3)		SMALL		OR I I	SMALL		
NTA		REMAINING AFTER	enderie. Allen	NUM PREVIO	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENOMENT	Total	* 32	Minus	##	24	= 8		X\$\$€	200	OR	X\$18=		
MEN	Independent	. 4	Minus	***	3	=		X42=	100	OR	X84=		
لـُـا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>!</b>	+140=		OR	+280=		
								TOTAL			TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)	A	DDIT. FEE			ADUII. FEE		
		CLAIMS		HIGH	HEST		۱ ۲		ADDI-			ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
NDW	Total	*	Minus	**		5	1 [	X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***			] [	X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=		
							L	TOTAL		00	TOTAL		
								DDIT. FEE	<u> </u>	Un	ADDIT. FEE		
		(Column 1)			mn 2) HEST	(Column 3)	1 -						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREVI	MBER HOUSLY FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Z OM	Total	*	Minus	**		=	11	X\$ 9=		OR	X\$18=		
ME	Independent	•	Minus	***			1	X42=		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE										OR	ADDIT. FEE		
	The *Highest Num	mber Previously Pa	id For" (Total or	r Independ	dent) is the	e highest number	er four	nd in the a	ppropriate bo	x in co	lumn 1.		